## DEPARTMENT OF SOCIAL AND HEALTH SERVICES MEDICAL ASSISTANCE ADMINISTRATION Olympia, Washington

To: Pharmacists Memorandum No. 04-63 MAA

Managed Care Plans Issued: August 12, 2004

From: Douglas Porter, Assistant Secretary For further information, go to:

Medical Assistance Administration http://maa.dshs.wa.gov/pharmacy/

**Subject:** Prescription Drug Program: Maximum Allowable Cost Update

Effective for dates of service on and after September 1, 2004, the Medical Assistance Administration (MAA) will implement the following changes to the Prescription Drug Program:

1. New additions to the Maximum Allowable Cost (MAC) list;

2. Deletions from the MAC list; and

3. Adjustments to existing MACs.

## 1. MAC Additions:

			MAC
			<b>Effective</b>
Generic Name	Strength	Form	09/01/04
NEFAZODONE HCL	50MG	TABLET	\$0.44100
NEFAZODONE HCL	100MG	TABLET	\$0.28400
NEFAZODONE HCL	150MG	TABLET	\$0.28800
NEFAZODONE HCL	200MG	TABLET	\$0.29000
NEFAZODONE HCL	250MG	TABLET	\$0.51000
RIBAVIRIN	200MG	CAPSULE	\$5.12000

## 2. MAC Deletions:

			MAC Effective
Generic Name	Strength	Form	09/01/04
GRISEOFULVIN,			
MICROSIZE	500MG	TABLET	\$0.00000

## 3. MAC Adjustments:

			MAC Effective
Generic Name	Strength	Form	09/01/04
HYOSCYAMINE SULFATE	0.375MG	CAPSULE SR	\$0.09280
HYOSCYAMINE SULFATE	0.375MG	TABLET SR	\$0.08270
HYOSCYAMINE SULFATE	0.125MG	TABLET SL	\$0.05050
PROCHLORPERAZINE			
MALEATE	10MG	TABLET	\$0.11000